Appendix B

Commonwealth of Virginia Database Index Reporting Form		
1. Public Body Name & Numeric Code:	od. of Rehab Se	1. Point of Contact: Jack Caraber 362 5. Phone Number: 804-662-7578
2. Database Title: DDS Claima	I Tracking	5. Phone Number: 804-663-7578
3. Database Acronym: C/ACS	- O	6. Signature & Date: Cen Stanfuld 7/4
state government and a description of the gener	al contents of the database. Indica	e purpose for which the database is maintained in support of the business of ale known restrictions to public access.)
Trucks demog	raphic du	ta an claimants who
apply for disus	ility (SSI/SS	DI) and are being reviewed
by the Disabilit	14 Determina	Tien Services unt d
the agency. C	lumant of	ta an claimants who DI) and are being reviewed which Services unt of pecific duta is contidential.
The state of the s	ecord/table layouts, and known res	strictions to public access is maintained by the public body. Please contact the
3. Date of Last Update: 7/14/97	9. Frequency of Update	n: ☑️⊅aily, ☐ Weekly, ☐ Monthly, Other:
	Provide a description of each form	nat in which the database is made available, and the cost, if any, of each format.)
a. Format		b. <u>Cost</u>
. hurd copy		
. diskette		•
		•
end completed form to The Library of Virginia. 80	Fact Broad Street Biobs 1/2	

Send completed form to The Library of Virginia, 800 East Broad Street, Richmond, Virginia 23219-1905 (Attn: Mary Clark). 5/30/97